1403-127-0475

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

PAGE 1 / 4 -

FORM 1		O	RGANI	ZATIO	N			L B A	
1. NAME OF COMMITTEE (in	full)		Check if name changed)		mple:If typing, type the lines.	12FE		TAIL C	MICK
RICE Amer	ica PA	C-Re	publicar	ns in C	ongress Em	power	ing A	meric	a L L L L L L
						1_1_1_1		111	
ADDRESS (number an		228 S. W	ashington St., S	te. 115	<u></u>				
(Check if a is changed				1_1 1_1	<u> </u>	<u> </u>	1-1-1		
is changed	,	Alexandr L L Cl	ia LL_L_L TY▲			STATE A	223		CODE A
COMMITTEE'S E-MA	IL ADDRESS	S .		•					
(Check if a is changed		llisker@	hdafec.com	1 - 1111			<u>) ') </u>		لببيا
		Optional	Second E-Mai	Address	 				
COMMITTEE'S WEB (Check if a is changed	ddress	RESS (UF	RL)	<u> </u>		<u> </u>			
		L	<u> </u>	1.1.1.1	11111		-1-1-1		
2. DATE 07	/ / 0 + 0 17		2014					٠	
3. FEC IDENTIFIC	ATION NUI	MBER ▶	. C						
4. IS THIS STATEM	IENT 🗵	NEW	(N) OF	?	AMENDED (A)				
I certify that I have e	xamined this	Stateme	nt and to the	best of my	knowledge and belief	it is true, co	orrect and	d complete.	
Type or Print Name of	of Treasurer	Lisa Lisk	ker						
Signature of Treasure	r Lisa Lis	ker 🖊	Dea R	R		Date	0,7		2014
NOTE: Submission of					bject the person signing			penalties o	f 2 U.S.C. §437g.
Office Use					For further information Federal Election Commis			FEC F	_

Local 202-694-1100

1403
-,
177
-
0 4
6

FEC	C Form	1 (Revised 02/2009)	Page 2
		MMITTEE	
5	date (🎮	Committee:	
(a) [This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name o Candida			
Candida Party Af		Office Sought: House Senate President	State
Party A	Illianoi	Sought: House Senate President	District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida			
Party	Com		
(d)		, , , , , , , , , , , , , , , , , , ,	(Democratic, Republican, etc.) Pa
Politic	al Ac	tion Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization
		Corporation Corporation w/o Capital Stock	Labor Organizatio
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	Oooporao
(f)	$\overline{\mathbb{X}}$	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or pa
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	-undr	aising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
1	Comn	nittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

write or type Committee Name			
RICE America F	PAC-Republicans in Cong	ress Empowerir	ng America
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundrais	sing Representative, or Leader	ship PAC Sponsor
TOM RICE			
	<u> </u>		
Mailing Address	1107 48TH AVE. N.		
	SUITE 310-A		
	MYRTLE BEACH	29577	
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fu	undraising Representative 🔯 L	eadership PAC Sponsor
. Custodian of Records: Iden books and records.	tify by name, address (phone number optional) a	and position of the person in p	ossession of committee
Lisa Lisker			ı
Full Name	,228 S. Washington St. Ste. 115		-
Mailing Address			
		111111111	
	Alexandria	VA 22341	
Title or Position	CITY	STATE	ZIP CODE
Treasurer		hone number 703 - [549 - 7705
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasussistant treasurer).	rer of the committee; and the r	name and address of
Full Name Lisa Lisker of Treasurer	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Mailing Address	228 S. Washington St. Ste. 115		
	Alexandria CITY	VA 22341 STATE	ZIP CODE
Title or Position Treasurer	Telep	hone number 703 - [549 - 7705

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	Keith Davis	<u>, , , , , , , 1</u>
Mailing Address	228 S. Wahington St., Ste. 115	
	Alexandria , VA , , 22314	
	CITY STATE	ZIP CODE
Title or Position Assistant Treasu	rer	549 - 7705
		ds accounts, rents
	1909 K St., NW	<u> </u>
Mailing Address		
	Washington DC 20006	
	CITY STATE	ZIP CODE
Name of Bank, I	Depository, etc.	
Mailing Address		
	CITY STATE	ZIP CODE

RECEIVED SEIH 7175 18 414 9:42 FEC MAIL CENTER

1403-127-0479

Insert shipping document here.

Ship Date: 17JUL14 ActWgt: 0.3 LB CAD: 8587532/INET3550

Origin ID: NDVA

From: (703) 549-7705

Lisa Lisker Huckaby Davis Lisker 228 S. Washington St., Ste. 115

Alexandria, VA 22314

Extremely Urgent

Page 1 of 1

FRI - 18 JUL 10:30A

RICE PAC

BILL SENDER

Ref# Invoice# PO# Dept#

Federal Election Commission 999 E ST NW

SHIP TO: (202) 694-1139 Public Records

Washington, DC 20463

PRIORITY OVERNIGHT

0,700

20463 pc.us IAD



19 RDVA

ssəld

B

ov EFC SECURITY

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered			Date of Receipt
USPS First Class Mail			Postmarked
USPS Registered/Certified			Postmarked (R/C)
USPS Priority Mail			Postmarked
USPS Priority Mail Express	-		Postmarked
Postmark Illegible			
No Postmark			
Overnight Delivery Service (Specify)	: Fed	Ex	Shipping, Date 7/17/14
	N	ext Busi	ness Day Delivery
Received from House Records & Re	gistration	Office	Date of Receipt
Received from Senate Public Record	ds Office		Date of Receipt
Received from Electronic Filing Office	е		Date of Receipt
Other (Specify):		Date (of Receipt or Postmarked
A			7/18/14
PREPARER			DATE PREPARE